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|---|---------------------------------------|---------------------------------|------------------|--------------------|---|---|----------------------------|------------------------|
| PATENT APPLICATION FEE DETERMINENT  |                                       |                                 |                  |                    |   | 09/843358   |                            |                        |
| CLAIMS AS FILED - PART I  |                                       |                                 |                  | SMALL ENTITY       |   | OR .  | OTHER THAN<br>SMALL ENTITY |                        |
|   | (Column 1)                            | MUMBER                          |                  | RATE               | FEE   |   | RATE                       | FEE                    |
| FOR SASIC FEE   | MUMBER FILED                          | RUMBER                          | ZAIIAA .         | - WATE             | :395  | OR  |                            | <u>.190</u>            |
| 37 CFR 1.16(a))   | <u> </u>                              | T                               |                  | 9:                 |   | OR  | x.18 = .                   | ·                      |
| TOTAL CLAIMS<br>37 CFR 1.16(c)  | minus 20 =                            | <u>  </u>                       |                  | 144                |   |   | x.83 -                     | ÷                      |
| NDEPENDENT CLAIMS<br>37 CFR 1.16(b))  | arinus 3 =                            | <u> </u>                        |                  | x 44 =             |   | OR'   | 206                        | ··· <u>·</u>           |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))   |                                       |                                 |                  | +:130=             |   | OR  | +1500 =                    | <u> </u>               |
| " If the difference in column 1 is less than zero, enter "0" in column 2.   |                                       |                                 |                  | TOTAL              | <u>'</u> ــــــــــــــــــــــــــــــــــــ | OR'   | TOTAL                      | · ·                    |
|   | IMS AS AMENDED -                      |                                 |                  |                    |   | •   |                            | T11861                 |
|   | (Column 1)                            |                                 | (Column 3)       | SMALL              | ENTITY  | OŖ  | OTHER<br>SMALL             |                        |
| < 10/5/4  | CLAIMS<br>REMAINING<br>AFTER          | HIGHEST<br>NUMBER<br>PREVIOUSLY | PRESENT<br>EXTRA | RATE               | ADDI-<br>TIONAL<br>FEE                        | ٠   | RATE                       | ADOI-<br>TIONAL<br>FEE |
| S Total   | AMENOMENT Minus                       | PAID FOR                        | 9                | × 59 =             |   | OR  | x s 18 =                   | 1602,0                 |
| C) (17 CFR 1.15(d))   | 12 Minus                              | -//                             | 7                | × 44 =             |   | OR'   | x : 88 =                   | 88.0                   |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4))   |                                       |                                 |                  | + 150.             |   | OR  | +300.                      | Tay to day             |
| Table Processing  |                                       |                                 |                  | TOTAL<br>ADD'L FEE |   | OR  | ADO'L FEE                  |                        |
|   | (Column 1)                            | (Column 2)                      | (Column 3)       |                    | ·   | - ·   | <u></u>                    | <del></del> .          |
| 1000 H  | CLAIMS<br>REMAINING<br>AFTER          | HIGHEST<br>NUMBER<br>PREVIOUSLY | PRESENT          | RATE               | ADDI-<br>TIONAL<br>FEE                        |   | RATE                       | ADDI-<br>TIONAL<br>FEE |
| Total O Total               | AMENDMENT Minus                       | PAID FOR                        | <del>}</del> /   | x.9=               |   | OR  | x 1/8 =                    | /                      |
| C) (37 CFR 1.16(d)  Z Independent  U (37 CFR 1.16(d))   | Minus                                 | -5000                           | -/-              | x : 44 =           |   | OR  | x : 88 =                   | <del></del>            |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))   |                                       |                                 |                  | +=/50=             |   | OR  | +.309=                     | <u> </u>               |
| FIRST PRESERVATION OF BUSINESS  |                                       |                                 |                  | TOTAL<br>ADD'L FEE |   | OR  | ADD'L FEE                  |                        |
|   | · · · · · · · · · · · · · · · · · · · | (Calumn 2)                      | (Column 3)       |                    |   | _   |                            | <del></del>            |
| <u>0</u>  | (Column 1) CLAIMS REMAINING AFTER     | HIGHEST<br>NUMBER<br>PREVIOUSLY | PRESENT<br>EXTRA | RATE               | ADOI-<br>TIONAL<br>FEE                        |   | RATE ·                     | ADOL-<br>TIONAL<br>FEE |
| Y Total   | AMENDMENT Minus                       | PAID FOR                        | •                | 11.9               |   | OR.   | x : 18 =                   |                        |
| O1 078 1.16(d)  | - Minus                               | •••                             | -                | × 5_7_=            |   | OR  | x:58 .                     |                        |
| Z Independent<br>(37 OFR 1.16(h))   |                                       | <u></u>                         | l                | ICA                | +   | OR  | + 300 .                    |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))   |                                       |                                 |                  | TOTAL              |   | ┪▔  | TOTAL<br>ADOL FEE          |                        |
|   |                                       |                                 |                  | ADD'L FEE          | ــــا   | OR  | ALLEC                      | L                      |

\* If the entry in column 1 is less than the entry in column 2, write '0' in column 3.

"If the "Fighest Number Previously Paid For' IN THIS SPACE is less than 20, enter '20'.

"If the "Fighest Number Previously Paid For' IN THIS SPACE is less than 3, enter '30'.

"If the "Fighest Number Previously Paid For' IN THIS SPACE is less than 3, enter '30'.

The "Fighest Number Previously Paid For' IN THIS SPACE is less than 3, enter '30'.

This collection of information is required by 30' (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 30' (Fig. 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete use of the USPTO. Time will vary depending upon the individual case. Any comment: including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Paters on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.